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AO 240 (Rev. 07/10) Application to Proceed in District Court Without Prepaying Fees or Costs (Short Form)

UNITED STATES DISTRICT COURT

for the

LUCHO EL POR LICETTAC

STEVEN PEREZ''

Plaintiff/Petitioner

MAMEDORD'STATE POLICE

Defendant/Respondent ET ANIA

for the

for the

Civil Action No.

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

2. If not incarcerated. If I am employed, my employer's name and address are:

My gross pay or wages are: \$, and my	take-home pay or	wages are: \$	per	
(specify pay period)				
3. Other Income. In the past 12 months, I have received income from the following sources (check all that apply):				
(a) Business, profession, or other self-employment	□ Yes	\ \pi/No		
(b) Rent payments, interest, or dividends	□ Yes	\ No		
(c) Pension, annuity, or life insurance payments	☐ Yes	n No		
(d) Disability, or worker's compensation payments	☐ Yes	$\beta_{ m No}$		
(e) Gifts, or inheritances	☐ Yes	/D No		
(f) Any other sources	□ Yes	□ N ₀		

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

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4. Amount of money that I have in cash or in a checking or savings account: \$

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name (describe the property and its approximate value):

4th Amendment

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses (describe and provide the amount of the monthly expense):



7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:



8. Any debts or financial obligations (describe the amounts owed and to whom they are payable):



Declaration: I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Date: 7/20/21

Applicant's signature

Printed name